

# CLAIMS ONLY

Application Number

101661,569

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1		1			
2		1		1		
3						
4						
5						
6						
7						
8						
9						
10	1	1	1			
11				1		
12						
13				1		
14	1					
15		1				
16						
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22	1					
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35	1					
36		1				
37						
38	1					
39						
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41	1					
42		1				
43						
44	1					
45						
46						
47	1					
48	1					
49	1					
50						
Total Indep	13		2			
Total Depend	36		11			
Total Claims	49		13			

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	Indep	Depend	Indep	Depend	Indep	Depend
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100						
Total Indep						
Total Depend						
Total Claims						